

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

01518410 17 DEC 2004

FILING DATE

APPLICATION

9-10-07 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1			/		/				51					
2			/		/				52					
3			/		/				53					
4			/		/				54					
5									55					
6									56					
7			/		/				57					
8			/		/				58					
9									59					
10			0		3				60					
11									61					
12									62					
13									63					
14									64					
15			/		/				65					
16			/		/				66					
17			/		/				67					
18			/		/				68					
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42									92					
43									93					
44									94					
45									95					
46									96					
47									97					
48									98					
49									99					
50									100					
TOTAL IND.			↓	6	↓	5	↓		TOTAL IND.			↓		
TOTAL DEP.			←	8	←	15	←		TOTAL DEP.			←		
TOTAL CLAIMS			14		18				TOTAL CLAIMS					